

STATE OF NEW HAMPSHIRE, DEPARTMENT OF CORRECTIONS
Helen E. Hanks, Commissioner



AUTHORIZATION FOR NEWS MEDIA ACCESS TO STAFF OR PUDC

☐ PERSON UNDER DEPARTMENTAL CONTROL

☐ AFF

 Representing
 Name of Individual _____ Name of News Media _____

Is authorized to ☐ interview ☐ audio record ☐ video record ☐ photograph
 (please check all that apply)

For the purpose(s) of:

to be published or broadcast on (if known) _____

When

Where

Subject to the following conditions:

1. This authorization may be rescinded at any time pending any appeal by the news media representative to the Commissioner of Corrections.
2. The staff or PUDC to whom access is granted may terminate at any time for any reason.
3. If authorization is granted for access to staff, the access may be terminated at any time for any reason.
4. If authorization is granted for access to staff, the staff may, if staff desires, be accompanied by the Public Information Officer or designee;
5. If authorization is granted for access to a PUDC the access may be terminated:
 - a. If there is reasonable suspicion that the access or the publication or broadcast might facilitate criminal activity or violation of the facility's rules or create a risk to safety, security, or orderly management of the facility; the impact on the victim would be excessive; the access might adversely impact a criminal investigation or prosecution; the access might harm the welfare of a PUDC, including by a violation of a right to confidentiality; the PUDC is unavailable or unable or unwilling to participate; it is determined to be an excessive demand on staff resources; or refusal or failure to abide by any condition set by the Public Information Officer, or designee, any facility rule, or any staff instructions;
 - b. The PUDC or the news media representative is exhibiting behavior which is inappropriate, including inappropriate physical contact;
 - c. An emergency or critical incident occurs; or
 - d. The information or material being sought or obtained is beyond that of which the Public Information Officer, or designee, gave authorization.
6. Any material or information obtained including, but not limited to, the interview, audio/video recording or photograph, shall not be used other than for the purpose set out in the written request to the Public Information Officer, or designee, and for which authorization was given.

7. The Public Information Officer, or designee, may be present during any interviewing, audio/video recording, or photographing of a PUDC or staff by the news media.
8. If the PUDC is an adult with a guardian, the use of the PUDC's name, hometown, or other personal information, identifiable photographs, or identifiable audio/video recordings or any other disclosure of identifying information is strictly prohibited at all times.
9. If a PUDC is 18 years of age or over and has no guardian, the PUDC/Staff's identity, hometown, or any other personal information shall not be disclosed by any representative of the media, unless specifically authorized on the Consent for News Media Access Form.
10. If a PUDC is 18 years of age or over and has no guardian, photographing or audio/video recording which might reveal the identity of the PUDC shall not be done, unless specifically authorized on the Consent for News Media Access Form.
11. If a PUDC is 18 years of age or over and has no guardian, the media's work product shall not contain any information which might lead to the identification of the PUDC, unless specifically authorized on the Consent for News Media Access Form.
12. If a PUDC is 18 years of age or over and has no guardian, should the identity of a PUDC be disclosed as a result of the media access authorized, that identity shall not be confirmed by any representative of the media, unless specifically authorized on the Consent for News Media Access Form.
13. The interview/audio/video recording/ photographs shall be used only when and where and for the purpose(s) noted above, provided any broadcast noted above may be repeated or any publication noted above may be reprinted as is customary for the media; and
14. Other conditions, if any: _____

Date Approved: _____

Information Officer or Designee

Date Approved: _____

Commissioner or Assistant Commissioner

On behalf of myself and the news media I am representing, I agree to the above conditions.

Signature of Media Representative _____ Date _____

Position _____ Media _____

This form should be forwarded to:

New Hampshire Department of Corrections

Information Officer

NH Department of Corrections

PO Box 1806 Concord, NH 03302 Phone: (603)271-5602 Fax: (888) 908-9477

E-Mail: feedback@doc.nh.gov

Or

Tina Thurber

Information Officer

NH Department of Corrections

PO Box 1806 Concord, NH 03302

Phone: (603)271-5648 E-Mail: Tina.Thurber@doc.nh.gov